

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gary Edward Trewiler et al. :  
Serial No.: 10/713,493 : Group No.: 3726  
Filed: November 14, 2003 : Examiner: Afzali, Sarang  
For: METHOD FOR REPAIRING GAS :  
TURBINE ROTOR BLADES :

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL**

1. Transmitted herewith is:  
Transmittal (3 pages)  
Amendment in response to Office Action dated June 4, 2008 ( 10 pages)

**STATUS**

2. Applicant  
 claims small entity status.  
 is other than a small entity.

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

(a)  Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 130.00	\$ 65.00
<input checked="" type="checkbox"/> second month	\$ 490.00	\$ 245.00
<input type="checkbox"/> third month	\$ 1,110.00	\$ 555.00
<input type="checkbox"/> fourth month	\$ 1,730.00	\$ 865.00
<input type="checkbox"/> fifth month	\$ 2,350.00	\$1,175.00
	<b>Fee Due</b>	<b><u>\$ 490.00</u></b>

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

**OR**

(b)  Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
TOTAL INDEP	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	ADDITIONAL RATE FEE
	MINUS	=	x \$26.00 = \$	x \$52.00 = \$
FIRST PRESENTATION OF MULTIPLE DEP CLAIM				
	MINUS	=	x \$110.00 = \$	x \$220.00 = \$
			+ \$195.00 = \$	+ \$390.00 = \$
			TOTAL ADDITIONAL FEE \$	TOTAL ADDITIONAL FEE \$

(a)  No additional fee for Claims is required

OR

(b)  Total additional fee for claims required \$

### FEES PAYMENT

5. Attached is a check in the sum of \$\_\_\_\_\_

Charge Deposit Account No. 01-2384 the sum of \$490.00.  
A duplicate of this transmittal is attached.

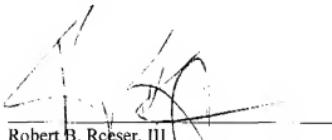
### FEES DEFICIENCY

6.  If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7.  Other:

  
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